

Multi-sensor Esophageal Temperature Probe Reduces Incidence of Ablation **Related Thermal Injury**

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BACKGROUND

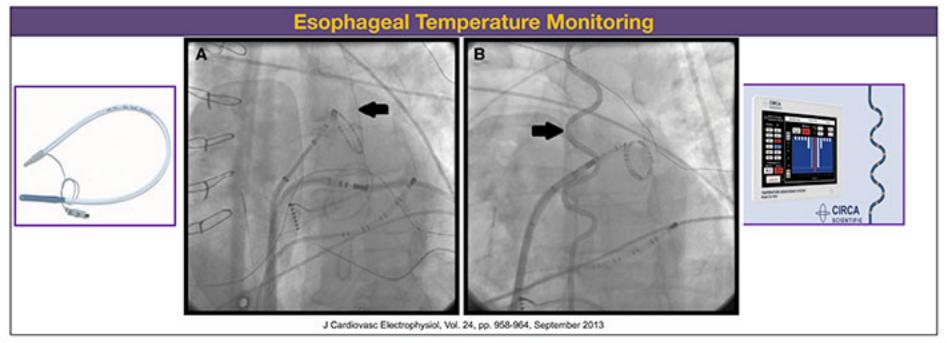
 Esophageal temperature monitoring during AF ablation is performed to prevent esophageal thermal injury (ETI).

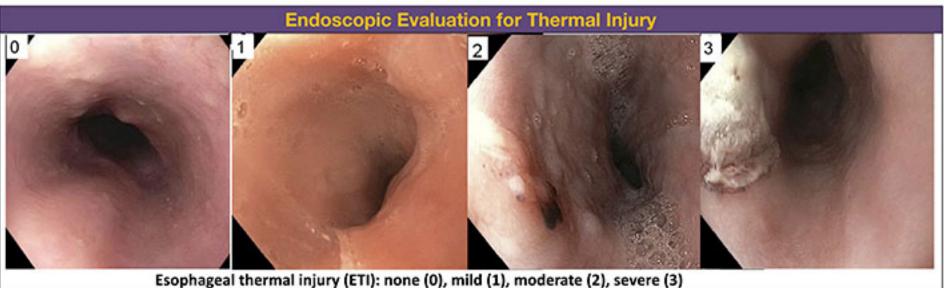
OBJECTIVE

To determine whether a multisensor temperature probe (MSTP) reduces endoscopy (EGD) detected ETI compared to single sensor temperature probes (SSTP).

METHOD

- · Consecutive patients undergoing AF ablation at the University of Washington, using cryoballoon (CB) or radiofrequency ablation (RFA) with post-procedure EGD were included.
- SSTP was routinely used from April 2015 until May 2018, and MSTP was routinely used afterwards.
- For SSTP, ablation stop parameters were a rise of 0.2 C from baseline (RFA), or drop below 30 C (CBA).
- For MSTP, ablation stop parameters were 37.5 Celsius for RFA, or dropped below 25C for CBA.
- EGDs were performed in all patients 24 hours following their ablation
- ETI was classified as follows: normal (grade 0), mild erythema (grade 1), moderate shallow ulcer (grade 2) and severe or deep ulceration (grade 3).
- EGD findings were compared between SSTP and MSTP.





RESULT

239 patients met the inclusion criteria

SSTP (n=203) ETI (%)	MSTP (n=36) ETI (%)
40/118 (34%)	4/25 (16%)
18/85 (21%)	0/11 (0%)
	40/118 (34%)

ETI on EGD	SSTP (n=203)	MSTP (n=36)
Total	58 (29%)	4 (11%)
Mild	52	4
Moderate	5	0
Severe	1	0

34%			
	■ Mild ■	Mod ■ Severe	0.03
	P=0.03		
		21%	
	16%		
			1
			0%
			0,0

SSTP: Single-sensor temperature probe, MSTP: Multi-sensor temperature probe,

RF: Radiofrequency ablation, CB: Cryoballoon ablation

Patient Characteristics						
	SSTP (n=203)	MSTP (n=36)	Р			
Age	63 ± 11	63 ± 10	0.99			
Female	69 (34%)	14 (39%)	0.56			
RFA	118 (58%)	25 (69%)	0.22			
Cryo	85 (42%)	11 (31%)	0.22			
HTN	54.7%	54.7%	1.00			
DM	18.2%	15.6%	0.71			
OSA	36.5%	33.5%	0.73			
CAD	17.2	16%	0.86			
CHF	22.2	20.7%	0.84			
Stroke/TIA	5.9	3.9%	0.63			
CHA2DS2VASc	2.5	2.6	0.90			
GERD	25%	24%	0.89			
ВМІ	31.5	32.2	0.93			
LVEF	54± 12	55±9	0.91			

- ETI severity was mild in all patients monitored using the MSTP.
- · For patients monitored using the SSTP, ETI severity was mild in 52 (25.6%), moderate in 5 (2.5%) and severe in 1 patient (0.5%).

CONCLUSIONS

- · The use of multisensory temperature probe with conventional stop parameters significantly lowered the incidence of esophageal thermal injury compared to single sensor temperature probe.
- · Prospective studies are needed to further define the safety limits of esophageal luminal temperature

Disclosure: None